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<i>&amp;</i>	RANSMITTAL		Filing Date	February	28, 2005		
A STANASTICO III	FORM		First Named Inventor	ROMMEN	IS, Johann	a M.	
_			Art Unit	TBD			
(to be used fo	r all correspondence after in	itial filing)	Examiner Name	TBD			
	of Pages in This Submission	7,	Attorney Docket Number	8092-002-	us		
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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



### February 9, 2006

# CERTIFICATE OF MAILING (37 C.F.R. §1.8a)

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service on the date shown below with sufficient postage as First Class Mail in an envelope addressed to the Commissioner for Patents, Mail Stop: Information Disclosure Statement, P. O. Box 1450, Alexandria, VA 22313-1450.

	Christina Dueñas
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February 9, 2006	ara
Date of Deposit	Signature of Person Mailing Paper

## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:	) Examiner: TBA
Rommens, Johanna M., et al.	) Group Art Unit: TBA
Serial No.: 10/526,429	) Docket No.: 8092-002-US
Filed: February 28, 2005	) Date Mailed: February 9, 2006
For: DIAGNOSIS OF SHWACHMAN- DIAMOND SYNDROME	)
DIAMOND STNDROME	,

## <u>INFORMATION DISCLOSURE STATEMENT</u>

Mail Stop: Information Disclosure Statement Honorable Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Dear Commissioner:

This document is an Information Disclosure Statement to the above-cited patent application and filed pursuant to 37 C.F.R. § 1.97(b)(3). Therefore, no fee is believed to be due.

Attached is form 1449A/PTO listing documents believed relevant to the subject application. The submission of this document is not intended, nor should it be construed, to constitute an admission that any patent, patent application, article, or other information referred to herein is "prior art" unless specifically designated as such. In fact, applicants submit that these documents do not affect the patentability of the subject invention. In accordance with 37 C.F.R. § 1.97(g), the filing of this information shall not be construed to represent that a search has been made or that no other material information may exist. Neither should its submission be construed to indicate that a thorough search should not be conducted by the Examiner.

It is respectfully requested that the listing of documents in the attached forms be: (1) fully considered by the Patent and Trademark Office during the prosecution of this application; and (2) represented on any patent which may issue on the application. Applicant respectfully requests that the copies of the forms 1449A/PTO, be considered and initialed by the Examiner, be returned with the next communication pursuant to the §609 of the Manual of Patent Examining Procedures (MPEP).

The order of the documents listed in the attached forms is to be accorded no particular import, as the order thereof is completely fortuitous. Additionally, the documents are not necessarily analogous art. A copy of each article document listed in the attached form is enclosed.

It is believed that this disclosure complies with the requirements as set forth under 37 C.F.R. § 1.56, § 1.97, and § 1.98 and §707.05(b) of the MPEP. If for some reason the Examiner considers otherwise, it is respectfully requested that the undersigned be telephoned at (858) 450-0099 so that any deficiencies can be remedied.

It is further believed that this Information Disclosure Statement is being submitted before the mailing of an Office Action on the merits. Accordingly, no fee is believed to be due under 37 C.F.R. § 197(b)(3). If an Office Action on the merits has in fact been mailed, authorization is hereby given to charge the required fee of \$180.00 under 37 C.F.R. § 1.97(c)(2) and 1.17(p) to Deposit Account No. 502235.

Respectfully submitted,

Date: 2/9/04

David M. Kohn, J.D. Reg. No. 53,150

CATALYST LAW GROUP, APC 9710 Scranton Road, Suite 170 San Diego, California 92121 (858) 450-0099 (858) 450-9834 (Fax)

#### Substitute form 1449A/PTO Complete if Known 10/526,429 **Application Number** INFORMATION DISCLOSURE Filing Date February 28, 2005 First Named Inventor ROMMENS, Johanna M. STATEMENT BY APPLICANT FEB 1 3 2006 Group Art Unit TBD **Examiner Name TBD** (use as many sheets as necessary) Sheet 1 of 3 **Attorney Docket Number** 8092-002-US

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Examiner	Cite No.  U.S. Patent Document  Name of Patentee or Applicant of Cited  Document  Number  Kind Code (if known)				Name of Patentee or Applicant of Cited	Date of Publication of Cited Document
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	U.S. PATENT APPLICATIONS				
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	FOREIGN PATENT DOCUMENTS							
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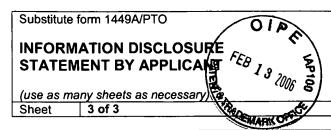
		OTHER NON PATENT LITERATURE DOCUMENTS			
Examiner Initials*	Cite No. Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published				
	2.	SHWACHMAN, H., Diamond, L.K. & Khaw, K., (1964), "The Syndrome of Pancreatic Insufficiency and Bone Marrow Dysfunction", J. Pediatr. v. 65, pp. 645-663.			
	3. GINZBERG, H. et al., (1999), "Shwachman Syndrome: Phenotypic Manifestations of Sibling Sets and Isolated Cases in a Large Patient Cohort are Similar", J. Pediatr. v. 135, pp. 81-88.				
Examiner Signature Date Considered					

<sup>\*</sup>EXAMINER: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.

#### Substitute form 1449A/PTO Complete if Known **Application Number** 10/526,429 INFORMATION DISCLOSURÉ February 28, 2005 Filing Date STATEMENT BY APPLICANT First Named Inventor ROMMENS, Johanna M. FEB 1 3 7006 Group Art Unit **TBD Examiner Name TBD** (use as many sheets as necessary) 8092-002-US Sheet 2 of 3 Attorney Docket Number

		OTHER NON PATENT LITERATURE DOCUMENTS	1 =
Examiner nitials*	Cite No.	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published	Т
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Examiner Signature	Date Considered	



Complete if Known				
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Examiner Signature	Date Considered	